

ATTENDANT CARE

Service Description

H007-BW

A service that provides a qualified individual to supply needed services in order for an individual to remain in his/her home and/or participate in work/community activities.

Service Requirements and Limitations

1. This service may only be provided in the following settings:
 - 1.1 In the Division member's home (unlicensed).
 - 1.2 In a direct state contracted developmental home (i.e. where the licensee contracts directly with the Division, not a qualified vendor) when there is a specific issue, problem, or concern that is believed to be temporary or short-term and approved by the Division's Assistant Director.
 - 1.3 In the member's community:
 - 1.3.1 While accompanying the member, or
 - 1.3.2 While shopping or picking up medications.
2. This service shall not be provided in a provider's residence unless the residence is also the home of the member receiving the service.
3. This service shall not supplant the care provided by the member's natural supports.
4. This service shall not be provided while the member is attending day treatment and training and/or employment services.
5. Within the same day, this service shall not be provided in conjunction with Homemaker services without approval by the member's Support Coordinator.
6. This service shall not be provided when the member is hospitalized or otherwise receiving institutional services, except prior to discharge to ensure the member's home environment is safe and sanitary.
7. This service shall not be provided to members living in group homes, vendor supported developmental homes (child or adult), skilled nursing facilities, non-state operated Intermediate Care Facilities (ICFs), or Level I or Level II behavioral health facilities.
8. Homemaker tasks may include cleaning, shopping, and laundry as identified on the member's planning document [e.g., Individual Support Plan ("ISP")].

9. The responsible person is expected to provide all necessary housekeeping/homemaker and personal care supplies.
10. The responsible person is expected to provide money for supplies and food in advance of the purchase if the direct service provider will be shopping for food, household supplies, and/or medications.
11. If a member elects to have his or her spouse provide this service, the member shall comply with all applicable requirements including but not limited to the following:
 - 11.1 The member shall not receive more than 40 hours of this service in a week; and/or
 - 11.2 The member shall not receive similar or like services, such as Homemaker.
 - 11.3 The requirements imposed by A.A.C. R9-28-506.
12. This service shall be supervised and monitored. When the service is provided by a Qualified Vendor, it is the responsibility of the Qualified Vendor to conduct the supervision and monitoring. When the service is provided by an Individual Independent Provider, it is the responsibility of the member's planning team (e.g., ISP team) to decide, prior to the delivery of services, who will conduct the supervision and monitoring. The minimum requirements of the Arizona Health Care Cost Containment System ("AHCCCS") are:
 - 12.1 Conduct at least one (1) **personal on-site supervisory** visit for each direct service staff within the first ninety (90) days of their hire date, and annually thereafter, and when the direct service staff is working and physically present in the member's home. Additional supervisory visits might be warranted.
 - 12.2 Conduct an initial **monitoring** visit to speak with the member/member's representative regarding the quality of care, delivery of services, and education of the member/member's representative about the need to call the Qualified Vendor/Individual Independent Provider if concerns develop between supervisory and/or Support Coordinator visits. This visit must be initiated not more than five (5) days from initial provision of the service by the Qualified Vendor/Individual Independent Provider. A follow-up site visit is required at the thirtieth (30th) day. A visit at the sixtieth (60th) day is required if issues are identified; otherwise these ongoing visits occur at least every ninety (90) days thereafter.
 - 12.3 The completion of a supervisory visit may occur in conjunction with the monitoring visit.
13. The AHCCCS Agency with Choice Member-Directed Service Delivery Model/Option.
 - 13.1 The Qualified Vendor shall identify in the Division's Qualified Vendor Application and Directory System ("QVADS") whether it is participating in the AHCCCS Agency with

Choice member-directed service delivery model (see the AHCCCS website located at www.azahcccs.gov for additional information regarding the AHCCCS Agency with Choice member-directed service delivery model/option).

- 13.2 The Qualified Vendor accepting a service authorization for Attendant Care for a member who has chosen to participate in the AHCCCS Agency with Choice member-directed service delivery option shall participate in the AHCCCS Agency with Choice member-directed service delivery model, shall agree to comply with all AHCCCS rules and policies regarding the Agency with Choice member-directed service delivery model, and shall implement the member's planning document.
- 13.3 The Qualified Vendor shall comply with the AHCCCS Agency with Choice member-directed service delivery model requirements and ensure that the direct service staff providing Attendant Care is not the member's individual representative as defined by the AHCCCS Agency with Choice member-directed service delivery model.
- 13.4 A member participating in the AHCCCS Agency with Choice member-directed service delivery option may request a change in vendors at any time without having to express any reason for the change, notwithstanding Arizona Administrative Code ("A.A.C.") R6-6-2109(B), (C), and (D).
- 13.5 The Qualified Vendor that has chosen to participate in the AHCCCS Agency with Choice member-directed service delivery model may be required to provide additional training for the member and/or member's representative regarding the partnership as assessed and authorized by the Division. If this is required, the Qualified Vendor shall bill a unique service code as identified by the Division.
- 13.6 The Qualified Vendor that has chosen to participate in the AHCCCS Agency with Choice member-directed service delivery model may be required to provide additional training for the direct service staff outside of the scope of the required/standard training [i.e., Cardiopulmonary Resuscitation ("CPR"), First Aid, Article 9 (Managing Inappropriate Behaviors), Direct Care Worker, etc.] and in order to meet the unique needs of the member as assessed and authorized by the Division. If this is required, the Qualified Vendor shall bill a unique service code as identified by the Division.

Service Goals and Objectives

Service Goals

1. To assist the member to attain or maintain safe and sanitary living conditions and/or maintain personal cleanliness and activities of daily living.
2. To assist the member to remain in his/her home and/or participate in community activities.

Service Objectives

The Qualified Vendor shall ensure that the following objectives are met:

1. Implement the member's planning document based on the Division's assessment, which may include, but is not limited to:
 - 1.1 Meal preparation and clean-up (e.g., meal planning, food preparation, cooking, storing food, cleaning the dishes);
 - 1.2 Eating and assistance with eating (e.g., prompts to eat slowly, proper positioning while eating, monitoring for choking);
 - 1.3 Bathing (e.g., transferring into the tub or shower, adjusting water temperature for safety, monitoring for drowning risk, use of assistive devices);
 - 1.4 Dressing and grooming (e.g., oral hygiene, nail care, shaving, hair styling, putting on assistive devices);
 - 1.5 Toileting (e.g., bowel and bladder care);
 - 1.6 Mobility;
 - 1.7 Transferring;
 - 1.8 Housekeeping/homemaker and cleaning;
 - 1.9 Laundry;
 - 1.10 Shopping;
 - 1.11 Attending to certified service animal needs;
 - 1.12 Supervision, including behavior intervention techniques or other skills as identified on the member's planning document;
 - 1.13 Assisting the member in following his or her routine as determined by the priorities as identified on the member's planning document
 - 1.14 Assisting in providing appropriate attention to injury and illness;
 - 1.15 Maintaining skin integrity including the provision of first aid (i.e., prevention of pressure sores);
 - 1.16 Referring for appropriate action all members who present additional medical or social problems during the course of the service delivery;
 - 1.17 Assisting with self-administration of medication(s) or medication reminders;

1.18 Assistance to attain or maintain safe and sanitary living conditions as indicated in the member's planning document; and

1.19 In unusual circumstances, the following tasks may be performed:

1.19.1 To attain safe living conditions:

1.19.1.1 Heavy cleaning, such as washing walls or ceilings, and

1.19.1.2 Yard work, such as cleaning the yard and hauling away debris.

1.19.2 To assist the member in obtaining and/or caring for basic material needs for water, heating, and food.

Service Utilization Information

1. Using the assessment and plan development processes, the member's needs are assessed by the planning team based upon what is normally expected to be performed by a member and/or his/her natural supports. Consideration should be made to age-appropriate expectations of the member and his/her natural supports (what can reasonably be expected of each member based on his/her age). This service shall not supplant the care provided by the member's natural supports.

1.1 The assessment is documented in the Division's assessment tools.

2. This service is not intended to be used for the sole purpose of transportation but may be used to provide incidental transportation necessary to support the member's program activities.

Rate Basis

1. Published. The published rate is based on one (1) hour of direct service.

2. In no event will more than three (3) members receive this service with a single direct service staff person at the same time.

3. Throughout the term of the contract, the appropriate billing codes, billing units, and associated billing rules are subject to change. All billing codes and billing units, and associated billing rules will be included in the Division's Policies and Procedures Manual, Billing Manual, *RateBook*, and/or other provider resources made available by the Division.

Direct Service Staff Qualifications

1. Direct service staff shall have the ability to provide assistance to a member to meet essential personal, physical, and homemaking needs. This ability includes social, physical, emotional fitness, and the ability to communicate with the member as necessary. The Division may

request documentation to substantiate the direct service staff person's capabilities to perform the service.

2. Direct service staff shall not be the member's individual representative (as defined by the AHCCCS Agency with Choice member-directed service delivery model) when the member chooses the AHCCCS Agency with Choice member-directed service delivery option.

Direct Service Training Requirements

1. The Qualified Vendor shall ensure that direct service staff comply with the standards and requirements set forth in Section 5.3 in *Service Requirements/Scope of Work* of the Qualified Vendor Agreement before providing direct services alone with members.
2. AHCCCS Direct Care Worker Training and Testing. The Qualified Vendor shall ensure that direct service staff comply with the AHCCCS training and testing requirements for Direct Care Services provided by Direct Care Workers ("DCW") in accordance with AHCCCS policy and the AHCCCS Contractor Operations Manual ("ACOM") (see <http://azahcccs.gov/dcw>). The services provided by Direct Care Workers are collectively known as Direct Care Services. A Direct Care Worker (DCW) is a person who assists a member with activities necessary to allow him or her to reside in their home.
 - 2.1 A caregiver who is a Registered Nurse, Licensed Practical Nurse, or Certified Nursing Assistant per Arizona Revised Statutes ("A.R.S.") Title 32, Chapter 15, is exempt from the DCW training and testing requirements.
 - 2.2 A DCW with an initial hire date prior to October 1, 2012, is deemed to meet the training and testing requirements with the Qualified Vendor by whom they are currently employed. However, if the DCW becomes employed with another agency on or after October 1, 2012, they shall meet the training and testing requirements contained within the AHCCCS policy. All DCWs with an initial hire date on or after October 1, 2012, must meet the DCW training and testing requirements contained within the AHCCCS policy.
 - 2.3 The DCW shall meet the training, testing, and continuing education requirements as per AHCCCS policy and the ACOM, Chapter 429, Direct Care Worker Training and Testing Program.
 - 2.3.1 To meet the AHCCCS training and testing requirements for DCWs, the Qualified Vendor shall:
 - 2.3.1.1 Register with AHCCCS to become an Approved Program to provide the testing and training to its employees,
 - 2.3.1.2 Enter into a direct contracting relationship with an AHCCCS Approved Testing and Training Program which has an AHCCCS

Provider Identification Number to provide the testing and training to its employees, or

2.3.1.3 Enter into a direct contracting agreement with a Private Vocational Program (an AHCCCS Approved Program that does not have an AHCCCS Provider Identification Number or a subsidiary of a Direct Care Service agency).

2.3.1.4 Meet all applicable requirements specified in the AHCCCS Medical Policy Manual (“AMPM”) and all requirements included in the AHCCCS Provider Participation Agreement.

2.4 The Qualified Vendor shall be responsible for assuring that the DCW is in compliance with the AHCCCS policy for Direct Care Services.

2.5 The Qualified Vendor shall comply with recommendations and requirements resulting from the routine monitoring and supervision of the DCW to ensure competence in the direct care service being provided. The monitoring and supervision may also provide assistance with any adjustment issues between the member and the DCW.

Recordkeeping and Reporting Requirements

1. The Qualified Vendor shall maintain a copy of the Division’s assessment on file and make it available to the member/member’s representative and/or Division upon request.
2. The Qualified Vendor shall adhere to the requirements of “non-provision of service” as required by Division policy (see Section 5.2.6 in *Service Requirements/Scope of Work* of the Qualified Vendor Agreement).
3. The Qualified Vendor shall maintain daily records on file as proof of the number of hours worked by each direct service staff providing direct service to members.
 - 3.1 Each time sheet, equivalent document, or data system must contain the original signature or other independent verification (that complies with A.R.S. § 41-132) of the member/member’s representative after service delivery confirming the hours worked. Proof of hours worked must be signed or verified by the member/member’s representative before the Qualified Vendor submits the claim for payment.
4. The Qualified Vendor shall maintain data that demonstrates full compliance with all programmatic and contractual requirements of the Department and the Division.
5. The Qualified Vendor shall maintain documentation of any familial relationship that direct service providers have to any member, such as spouses, family members who reside with a member, family members who do not reside with a member.

- 5.1 The Qualified Vendor's billing document shall identify any familial relationships between a direct service provider and member served.
6. The Qualified Vendor shall maintain documentation of and communication with the member's Support Coordinator regarding any decline, improvement, or continuing maintenance of the member's condition in accordance with the AMPM.
7. For the AHCCCS Direct Care Worker Testing and Training, the Qualified Vendor shall:
- 7.1 Verify and document the DCW's related educational and work experiences;
 - 7.2 Keep records on continuing education, including hours and topics; and
 - 7.3 Document and maintain in the DCW's personnel file all monitoring and supervision assessments.